

THE CLEVELAND MUSEUM OF ART

FORTY-SEVENTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE

MAY 5 to JUNE 13, 1965

PLEASE
PLAINLY
OR TYPE

Collaborator if any _____

Artist _____

Sadie F.

Cole

LAST NAME

Address 13809 Cedar Road Cleveland Ohio
NO. STREET CITY

ZIP CODE 44118

COUNTY Cuyahoga

Tel. YE 2 2230

Out-of-town residents should state whether return shipment is required. YES NO

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank..

NUMBER FOR SALE	NUMBER IN EDITION (Graphic Prts.)	PRICE	TITLE
1		\$ 20.00	Enamel # 1
		N. F. S.	Enamel # 2
1		\$ 25.00	Enamel # 3
1		\$ 15.00	Enamel # 4
1		N. F. S.	Enamel # 5
1		\$ 20.00	Enamel # 6

15 May

Don

CLASS	JUROR'S MARK	
	ACCEPTED	REJECTED
9	1412	R ✓
9	1413	R ✓
9	1414	A ✓
9	1415	R ✓
9	1416	R ✓
9	1417	R ✓

SUBMIT ENTRY BLANK NO LATER THAN MARCH 8, 1965.

DO NOT WRITE
IN THIS SECTION

This entry blank must be fully made out (typewritten or plainly lettered) and signed.
Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1965

It is also understood that accepted entries will remain on exhibition until June 13, 1965

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

Sadie F. Cole

SIGNATURE

RETURN DATES FOR OBJECTS - Monday through Saturday 9 a.m. - 4:45 p.m. at Museum Service Entrance

Born in Cleveland YES NO

Entered Previous May Shows? YES NO

REJECTED: May 8-22
ACCEPTED: June 18-July 3

PAID MAR 9 1965
J